

## PART B - FEE(S) TRANSMITTAL

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Mail Stop ISSUE FEE  
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909 7590 10/14/2005  
**PILLSBURY WINTHROP SHAW PITTMAN, LLP**  
 P.O. BOX 10500  
 MCLEAN, VA 22102  
 01/18/2006 TBESHAW2 0000006 033975 09985699  
 01 FC:2501 700.00 DA  
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/985,699	11/05/2001	Mark Pepys	P 0284057 206002/JND	4029

TITLE OF INVENTION: THERAPEUTIC AGENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	01/17/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
MELLER, MICHAEL V		1655	514-002000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rcv 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list:

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Pillsbury Winthrop Shaw Pittman LLP

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Pentraxin Therapeutics LimitedLondon ENGLANDPlease check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
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4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-3475 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Thomas A. Cowley, Jr., Ph.D.Date January 17, 2006Typed or printed name Thomas A. Cowley, Jr., Ph.D.Registration No. 40,944

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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From-PILLSBURY WINTHROP

703-905-2500

T-604 P.001/002 F-369

Attorney's Docket 068300-0284057

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re PATENT APPLICATION of:  
MARK B PEPYS

Confirmation No: 4029

Application No.: 09/985,699

Group Art Unit: 1655

Filed: November 5, 2001

Examiner: Michael V. MELLER

Title: THERAPEUTIC AGENT

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Commissioner for Patents  
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Alexandria, VA 22313-1450

**CERTIFICATION OF FACSIMILE TRANSMISSION  
UNDER 37 C.F.R. §1.8**

I hereby certify that the following papers, consisting of two pages including this cover sheet, are being facsimile transmitted to the Patent and Trademark Office at (703) 273-2885 on the date shown below:

Issue Fee Transmittal and Issue Fee

PILLSBURY WINTHROP SHAW PITTMAN LLP

THOMAS A. CAWLEY, JR., PH.D.  
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(Certification of Facsimile Transmission—page 1)

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